pplication or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

JOHNA-DEIA

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			18					RATE	FEE	000	RATE	FEE
FOR ,			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/8 minus 20=		• 4			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 mir	us 3 =				X40=		OR	X80=	
MUI	TIPLE DEPENI	DENT CLAIM PF	RESENT	·				+135=		OR	+270=	1
* If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	THAN
	<u> </u>	(Column 1)	(Column 2			(Column 3)	<u>)</u>	Small B	NTITY	OR	SMALL	3
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
KIOK	Total	• · · · · · · · · · · · · · · · · · · ·	Minus	44		=		X\$ 9=		OR	X\$18=	
	Independent	<b>*</b> 10 m 10 m	Minus	a a a				X40=		OR	X80= ,,	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	NA STA	OR	<b>∔270=</b>	
(Column 1) (Column 2) (Column 3)								TOTAL ADDIT: FEE	A STATE OF THE SECOND S	OB.	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST ABER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	٠	Minus	00		=		X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	000	T 01 0 10 1	=		X40=		OR	∙X80≐	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=										OR	+270=	
								TOTAL ADDIT: FEE		OR	TOTAL ADDIT. FEE	
[	· · · · · · · · · · · · · · · · · · ·	(Column 1)	<u> </u>		ımn 2) HEST	(Column 3	<b>)</b>					2./
AMENDMENT C		REMAINING AFTER AMENDMENT		NUN PREV	ABER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	ůů.		=		X\$ 9=		OR	X\$18=	
S DANGE	Independent	•	Minus	000		]=		X40=		OR	X80=.	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+2/U=	, ,
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OH THIS SPACE IS LESS THAN 3, enter "3."										OR	ADDIT. FEE	
	The "Highest Nun	nber Pr viously Pa	id For" (T tal	r Indepen	dent) is th	highest num!	ber fo	und in the ap	propriate bo	x in co	olumn 1.	